

DO/E0 BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 673503 ✓	RECEIPT DATE:	10 / 17 / 00 ✓
IA NUMBER:	PCT/ JP99 / 02049 ✓	IA FILING DATE:	04 / 19 / 98 ✓
FAMILY NAME:	OHMI ✓	DELAY WAIVED (Y/N):	N ✓
GIVEN NAME:	TADAHIRO ✓	DEMAND RECEIVED (Y/N):	Y ✓
PRIORITY CLAIMED (Y/N):	Y ✓	PRIORITY DATE:	04 / 17 / 98 ✓
NO BASIC FEE (Y/N):	N ✓	US DESIGNATED ONLY (Y/N):	N ✓
ATTORNEY DOCKET NUMBER:	1776/00053 ✓	COUNTRY:	
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APPLICATION TITLES:
 DATA COMPRESSING DEVICE AND METHOD, DATA EXPANDING DEVICE AND METHOD,
 DATA COMPRESSING/EXPANDING SYSTEM AND METHOD, CODE BOOK MAKING METHOD,
 AND VECOTR QUANTIZING DEVICE AND METHOD

TAB TO LAST POSITION, PUSH SEND



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BIBDATASHEET

CONFIRMATION NO. 6775

Bib Data Sheet

SERIAL NUMBER 09/673,503	FILING DATE 10/17/2000 RULE	CLASS 382	GROUP ART UNIT 2621	ATTORNEY DOCKET NO. 1776/00053
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** CONTINUING DATA *****

This application is a 371 of PCT/JP99/02049 04/19/1999

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** FOREIGN APPLICATIONS *****

JAPAN 10-124284 04/17/1998

JAPAN 10-124286 04/17/1998

JAPAN 10-208364 07/23/1998

JAPAN 10-208366 07/23/1998

JAPAN 10-305336 10/27/1998

JAPAN 11-67086 03/12/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 02/12/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 54	TOTAL CLAIMS 105	INDEPENDENT CLAIMS 34
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>A.A.</i> Examiner's Signature	<i>A.A.</i> Initials			

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TITLE

Data compressing device and method, data expanding device and method, data compressing/expanding system and method, code book making method, and vector quantizing device and method

<p>FILING FEE RECEIVED 3057</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees (Filing)</p> <p><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</p> <p><input type="checkbox"/> 1.18 Fees (Issue)</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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